Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp CALIFORNIA 4			
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 01/01/2005 through 06/30/2005	1	REGISTRAR	/ Page _	of _77	
State Candidate Election Committee O Recall (Also Complete Part 5) General Purpose Committee O Sponsored O Small Contributor Committee	mplete Parts 1, 2, 3, and 4. rimarily Formed Ballot Measure committee) Controlled) Sponsored uso Complete Part 6) rimarily Formed Candidate/ fficeholder Committee uso Complete Part 7)	2. Type of Statement: ☐ Preelection Stateme ☐ Semi-annual Stateme ☐ Termination Stateme (Also file a Form 41) ☐ Amendment (Explain	ent nent ent 0 Termination)	Quarterly Stater Special Odd-Ye Supplemental P Statement - Atta	ear Report Preelection	
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Pat Bates for Supervisor STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP COMMITTEE MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	TOTAL SOBER MONE	Treasurer(s) NAME OF TREASURER Betty Presley MAILING ADDRESS CITY NAME OF ASSISTANT TREASURER	STATE SURER, IF ANY	ZIP CODE	AREA CODE/PHONE	
OPTIONAL: FAX / E-MAIL ADDRESS 4. Verification	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL AD	STATE	ZIP CODE	AREA CODE/PHONE	
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	By Give of Control By Signature of Control	Signaluja of Treesurepor Assista	Proponent or Responsible Officer		nd complete. I certify	

PPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

Page 2	of _77
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NAME OF OFFICEHOLDER OR CANDIDATE			ttee 6. Primarily Formed Ballot Measure (
Patricia Bates	•		WAME OF BALLOT MEASURE				
					······································		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NU Board of Supervisors County of Orange	MBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling of	ficeholder ca	adidata or et	ata magazza	
						ate measure	proponent, it a
			NAME OF OFFICEHOLDER, CAI	NDIDATE, OR PR	OPONENT		
Related Committees Not Included in this Statem	ent: List any committees						
not included in this statement that are controlled by you or an contributions or make expenditures on behalf of your candida	e primarily formed to receive cy.		OFFICE SOUGHT OR HELD			DISTRICT NO.	F ANY
Friends of Pat Bates - 2006	NUMBER 163599						
į.							
NAME OF TREASURER CO	NTROLLED COMMITTEE?	7.	Primarily Formed Can	didate/Offic	eholder Co	ommittee <i>Li</i>	st names of
Dahan Danahan	NTROLLED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s)	didate/Offices) for which the	eholder Co s committee is	ommittee Li primarily form	ist names of ned.
Dahan Danahan		7.	Primarily Formed Can officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR	s) for which the	s committee is	ommittee List primarily form	SUPPOR
Betty Presley	X YES NO	7.	NAME OF OFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD	St names of led. SUPPOR OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	X YES NO	7.	officeholder(s) or candidate(s) for which the	OFFICE SOU	primarily form	SUPPOR
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE	X YES NO NO AREA CODE/PHONE	7.	NAME OF OFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD	SUPPOR OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE	X YES NO	7.	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPOR SUPPOR SUPPOR SUPPOR SUPPOR
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE COMMITTEE NAME	X YES NO NO AREA CODE/PHONE	7.	NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPOR OPPOSE
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COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX) CITY STATE ZIP CODE COMMITTEE NAME I.D NAME OF TREASURER CO	AREA CODE/PHONE NUMBER INTROLLED COMMITTEE?	7.	NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD GHT OR HELD	SUPPOR SUPPOR SUPPOR SUPPOR SUPPOR

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period on 01/01/2005 CALIFORNIA FORM 460

Page _____ of ______ SEE INSTRUCTIONS ON REVERSE through . 06/30/2005 NAME OF FILER I.D. NUMBER Pat Bates for Supervisor 1265511 Column A Column B **Calendar Year Summary for Candidates Contributions Received** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ 109,060.00 109,060.00 2. Loans Received Schedule B, Line 3 1/1 through 6/30 7/1 to Date 0.00 1,000.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ ___ 109,060.00 20. Contributions 110,060.00 Received 4. Nonmonetary Contributions Schedule C, Line 3 100,00 100.00 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ 109,160.00 110,160.00 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made Schedule E, Line 4 \$ 64,914.39 64,914.39 **Candidates** 7. Loans Made Schedule H, Line 3 0.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ ____64,914.39 22. Cumulative Expenditures Made* 64,914.39 (if Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 5,692.71 13,968.56 **Date of Election** Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 100.00 (mm/dd/yy) 100.00 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 274,725.05 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above amounts in Column A to the 109.060.00 14. Miscellaneous Increases to Cash Schedule I, Line 4 corresponding amounts *Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. 15. Cash Payments Column A, Line 8 above report. Some amounts in 64,914.39 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ _ 318,870,66 figures that should be If this is a termination statement, Line 16 must be zero. subtracted from previous period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 18. Cash Equivalents See instructions on reverse \$ 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ 14,968.56 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

SEE INSTRUCTIONS ON REVERSE

Pat Bates for Supervisor

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A

Statement covers period from01/01/2005	CALIFORNIA 460
through06/30/2005	Page4 of77
	I.D. NUMBER 1265511

IF AN INDIVIDUAL, ENTER **AMOUNT CUMULATIVE TO DATE** PERELECTION . FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR **RECEIVED THIS** OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CALENDAR YEAR **TODATE** RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) 02/28/2005 Blake P. Anderson **XIND** General Manager 200,00 200.00 P 06 200.00 □сом Потн Orange County Sanitation **□PTY** District □scc 02/28/2005 Patricia A. Aston X IND Retired 200.00 400.00 P 06 700.00 ПСОМ Потн None **□PTY** □scc 02/28/2005 Gary Capata CPA XIND 125.00 350.00 P 06 1,500.00 СОМ □отн Capata & Co PTY □ scc 02/28/2005 Melody P. Carruth Councilmember XIND 125.00 125.00 P 06 125.00 ПСОМ Потн City of Laguna Hills **□PTY** □scc 02/28/2005 Harry Cheshire Retired MIND 200.00 325.00 P 06 1,225,00 Псом Потн None **□PTY** □scc

SUBTOTAL\$ 850.00

Schedule A Summary

1.	Amount received this period – itemized monetary contributions.	
	(Include all Schedule A subtotals.)\$	 104,223.00
2.	Amount received this period – unitemized monetary contributions of less than \$100\$	 4,837.00

 *Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period	CALIFORNIA 460
through <u>06/30/2005</u>	Page5 of77
	I.D. NUMBER
	1265511

Pat Bates for Supervisor AMOUNT IF AN INDIVIDUAL, ENTER **CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER CALENDAR YEAR TODATE RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) XIND 02/28/2005 William M. Crosby Attorney P 06 125.00 СОМ 125.00 125.00 □oтн William M. Crosby **□**PTY □scc **□IND** 02/28/2005 GPM Management Services Corp 125.00 250.00 P 06 500.00 □сом **TOTH** PTY □scc 02/28/2005 Tristan Krogius **□IND** Retired 200.00 300.00 P 06 600.00 ПСОМ Потн None **□**PTY □scc 02/28/2005 Loveton Pharmacy, Inc. 125.00 125.00 P 06 325.00 СОМ **▼OTH** PTY □scc 02/28/2005 Janice C. Lowther **IND** Retired 200.00 200.00 P 06 200.00 ПСОМ ПОТH None □ PTY □ SCC **SUBTOTALS**

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDL	JLE A	CONT

Statement covers period from 01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	- Page6_ of77
	I.D. NUMBER
	1265511

Pat Bates for Supervisor

NAME OF FILER

		1			12	65511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND IP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (AN. 1- DEC.)		R ELECTION TO DATE REQIRED)
02/28/2005	Markstein Beverage Co	□IND □COM ☑OTH □PTY □SCC		200.00	200.06	P 06	700.00
02/28/2005	Harold V. Nootbaar	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
02/28/2005	Forrest F. Owen	☑IND . ☐COM ☐OTH ☐PTY ☐SCC	Retired None	200.00	825.00	₽ 06	825.00
02/28/2005	Paul Hamilton Professional Corp	□IND □COM □OTH □PTY □SCC		300.00	300.00	P 06	300.00
02/28/2005	R. Hall Investment Properties	□IND □COM ☑OTH □PTY □SCC		200.00	1,500.00	P 06	1,500.00
			SUBTOTAL \$	1.000.00	The state of the s	e de la companya de l	(2)(1)(2)(1)(1)(3)(2)

*Contributor Codes
IND Individual
COM Recipient Committee
(other than PTY or SCC)
OTH -Other (e.g., business entity)
PTY Political Party
SCC Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	Page7 of7
	I.D. NUMBER
	1265511

Pat Bates for Supervisor

NAME OF FILER

RECEIVED	FULL NAME, STREET ADDRESS AND & CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) John Saunders	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (AN. 1 DEC.)	, ,	TO DATE
02/28/2005	John Saunders		Dweetdoor			PER ELECTION TO DATE (IF REQIRED)	
		OTH PTY SCC	President Saunders Property Co.	125.00	975.00	P 06	1,075.00
02/28/2005	Diana V. Schlesinger	□IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.00	P 06	400.00
02/28/2005	Gary Thompson	☑IND □COM □OTH □PTY □SCC	Ship Repair Dept of Navy	125.00	125.00	P 06	125.00
	Chris Alexander	☑IND □COM □OTH □PTY □SCC	Realtor Sea West Properties	200.00	200.00	P 06	220.00
03/10/2005	Aqua Ben Corporation	□IND □COM ☑OTH □PTY □SCC		200.00	200.00	P 06	500.00

IND Individual
COM Recipient Committee
(other than PTY or SCC)
OTH -Other (e.g., business entity)

*Contributor Codes

PTY Political Party SCC Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA AGO
from01/01/2005	FORM 40U
through <u>06/30/2005</u>	Page 8 of 77
	I.D. NUMBER

NAME OF FILER

Pat Bates for Supervisor

1265511 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER DATE **AMOUNT** CONTRIBUTOR CUMULATIVE TO DATE PER ELECTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER RECEIVED **RECEIVED THIS** CALENDAR YEAR CODE * TODATE (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 03/10/2005 Michael J. Bartlett XIND Partner P 06 ПСОМ 375.00 125.00 375.00 Потн Blue Water Realty PTY □scc 03/10/2005 Bettencourt & Associates **□IND** 125.00 125.00 P 06 ПСОМ 125.00 **₩**OTH **PTY** □scc 03/10/2005 Brion May Consulting 250.00 1,500.00 СОМ P 06 1,500.00 **₩**OTH PTY □ scc 03/10/2005 Robert L. Brown **☑IND** Financial Planner 125.00 125.00 P 06 СОМ 125.00 Потн Tax & Financial Group **□PTY** □scc 03/10/2005 Peggy Ann Buff **VIND** Exec Assistant 125.00 125.00 P 06 □сом 125.00 □отн County of Orange **□**PTY □scc **SUBTOTALS**

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

750.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
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	1265511

NAME OF FILER

Pat Bates for Supervisor

						5511	*
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	j	R ELECTION TO DATE REQUIRED)
03/10/2005	C.V.R. Inc./Thomas W. Hribar	□IND □COM □OTH □PTY □SCC	,	125.00	175.00	P 06	175.00
03/10/2005	esection of the section of the secti	□IND □COM • ☑OTH □PTY □SCC		1,400.00	1,400.00	P 06	1,400.00
03/10/2005	Coffee Importers	☐IND ☐COM ☑OTH ☐PTY ☐SCC		125.00	125.00	P 06	125.00
03/10/2005	Cofiroute Global Mobility, LLC	□IND □COM ☑OTH □PTY □SCC		125.00	625.00	P 06	874.00
03/10/2005	Jeffrey Corless	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Advisor Castlerock Lending	200.00	200.00	P 06	200.00

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from01/01/2005	FORM 46U
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	1265511

NAME OF FILER

Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION O DATE EQUIRED)
03/10/2005	Charles H. Cressman	☑IND □COM □OTH □PTY □SCC	President Revenue Advantage Inc	125.00	125.00	P 06	125.00
03/10/2005	David A. Celestin & Associates	□IND □COM ☑OTH □PTY □SCC		125.00	125.00	P 06	325.00
03/10/2005	Richard E. Dietmeier	□ IND □ COM □ OTH □ PTY □ SCC	Retired None	125.00	175.00	P 06	175.00
03/10/2005	DMJMH+N Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	400.00
03/10/2005	Donald E. Moe, Inc.	□IND □COM ☑OTH □PTY □SCC		200.00	200.00	P 06	200.00
			SUBTOTAL	\$ 005.00		1.477	

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(other than PTY or SCC)

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from01/01/2005	FORM 40U
through <u>06/30/2005</u>	- Page <u>11</u> of <u>77</u>
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

	- Supervisor					1265	511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO I CALENDAR YE. (JAN. 1 - DEC. :	AR	1	ELECTION TO DATE REQUIRED)
03/10/2005	Christine M. Ferrigno	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Real Estate Acquisitions Ferrigno Real Estate	200.00	. 200	0.00	P 06	200.00
03/10/2005	Karen Davis Ferlauto	□IND □COM □OTH □PTY □SCC	Administrator . County of Orange	125.00	129	5.00	P 06	225.00
03/10/2005	John V. Foley	☑IND □COM □OTH □PTY □SCC	General Manager Moulton Niguel Water	200.00	200	0.00	P 06	200.0
03/10/2005	Government Solutions, Inc.	□IND □COM ☑OTH □PTY □SCC		125.00	125	5.00	P 06	125.00
03/10/2005	Rose Marie Gross	☑IND □COM □OTH □PTY □SCC	Sales Manager Shelby's Car Alarms	200.00	200	0.00	P 06	200.00
			SUBTOTAL \$	850.00				

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period from01/01/2005	CALIFORNIA 460
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	1265511

NAME OF FILER

Pat Bates for Supervisor

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE REQUIRED)
03/10/2005	Diane Harkey	☑IND □COM □OTH □PTY □SCC	Councilwoman City of Dana Point	1,400.00	1,500.00	P 06	1,500.00
03/10/2005	Maureen C. Hayes	□IND □COM □OTH □PTY □SCC	Vice President Parsons	200.00	200.00	P 06	200.00
03/10/2005	Susan W. Hinman	IND COM OTH PTY SCC	Retired None	125.00	125.00	P 06	125.00
03/10/2005	Inland Group Inc	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00	200.00	P 06	350.00
03/10/2005	Mary S. Jefferies	⊠IND □COM □OTH □PTY □SCC	Real Estate Sales Prudential	100.00	175.00	P 06	175.00
			SUBTOTAL	2,025.00	ra garage		

*Contributor Codes

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COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from 01/01/2005	FORM 400
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	1

NAME OF FILER

Pat Bates for Supervisor

1265511 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** DATE PER ELECTION CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER **RECEIVED THIS** RECEIVED CALENDAR YEAR TODATE CODE * (IF SELF-EMPLOYED, ENTER NAME **PERIOD** (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 03/10/2005 XIND Harold R. Kaufman Settlement Broker P 06 500.00 □сом 200.00 200.00 □отн EPS Settlements Group **□**PTY □scc 03/10/2005 **☑IND** Steven E. Lamar Consultant Lobbyist 125.00 125.00 P 06 □сом 125.00 □отн LegiSight, LLC □ PTY □scc 03/10/2005 Thomas Lund **☑IND** Dentist 200.00 200.00 P 06 Псом 500.00 □отн Thomas Lund, DDS **□**PTY □scc 03/10/2005 Kathleen Jones Maas MIND Homemaker 125.00 125.00 ПСОМ 1,400.00 ПОТН None PTY □scc 03/10/2005 Richard A. Mackaig **VIND** Retired 200.00 200.00 P 06 200.00 Псом ПОТН None □PTY □scc SUBTOTAL\$

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
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NAME OF FILER

Pat Bates for Supervisor

1265511 IF AN INDIVIDUAL, ENTER AMOUNT CUMULATIVE TO DATE **PER ELECTION**

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)	TO	DATE EQUIRED)
03/10/2005	Raghu Mathur	IND COM OTH SCC	Chancellor	125.00	125.00	P 06	125.00
03/10/2005	Michael Brandman Associates	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00	200.00	P 06	200.00
03/10/2005	Motorsports Industries	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Vice President Motorsport Industries	125.00	125.00	P 06	125.00
03/10/2005	Pacific Entertainment Group, LLC	□IND □COM ☑OTH □PTY □SCC		125.00	125.00	P 06	125.00
03/10/2005	Pacific Environmental Planning	□IND □COM ☑OTH □PTY □SCC	_	125.00	225.00	P 06	225.00
			SUBTOTAL S	700.00			

*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

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SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from 01/01/2005	FORM 400
through <u>06/30/2005</u>	Page15 of77
	I.D. NUMBER

NAME OF FILER

Pat Bates for Supervisor

rat bates for Supervisor			· .			1265511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	TODA		DATE	
03/10/2005	Nancy Padberg	⊠IND □COM □OTH □PTY □SCC	Public Admin Guardian , County of Orange	200.00	325.		P 06	325.00	
03/10/2005	George J. Pagano	□IND □COM □OTH □PTY □SCC	Real Estate Broker Prudential CA Realty	125.00	375.	.00 1	P 06	875.00	
03/10/2005	Elizabeth Pearson	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Owner Adworx	200.00	200	.00 1	P 06	200.00	
03/10/2005	Deborah Ann Peterson	☑IND □COM □OTH □PTY □SCC	Mortgage Broker Deborah Courtney	125.00	125.	.00	P 06	125.00	
03/10/2005	Prank Punelli	☑IND □COM □OTH □PTY □SCC	Attorney Davis Punelli & Keathley	200.00	200.	.00 I	P 06	600.00	
			SUBTOTAL \$	950.00			mirita i	a Japan Sarah	

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SCHEDULE A (CONT.)	SCHEDU	JLE A	(CONT.)
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Statement covers period	CALIFORNIA 460
from01/01/2005	FORM 400
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	I.D. NUMBER

NAME OF FILER

Pat Bates for Supervisor

COM COTH PTY SCC Sepulveda Building Materials IND COM OJH PTY SCC Scc Dozon Dozothy O. Wedel Dozon Dozothy O. Wedel Dozon Dozothy O. Wedel Dozon Dozothy O. Wedel Dozon Dozon Dozothy O. Wedel Dozon D							1265511		
COM OTH PTY SCC Sepulveda Building Materials IND COM OTH PTY SCC SCC		FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	1 CONTINUO TON	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME	RECEIVED THIS	CALENDAR YEAR		TODATE	
Sepulveda Building Materials	03/10/2005	Savala Construction Co, Inc.	□COM ☑OTH □PTY	•	200.00	200		P 06	600.0
COM	03/10/2005	Sepulveda Building Materials	□COM □OTH □PTY		125.00	125	5.00	P 06	475.0
	03/10/2005	William G. Steiner	□COM □OTH □PTY	Hebrock Steiner	125.00	125	5.00	P 06	125.00
	03/10/2005		□COM □OTH □PTY			200	0.00	P 06	200.00
	03/10/2005	Dorothy O. Wedel	□COM □OTH □PTY		125.00	125	5.00	P 06	125.00

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	california 460
through <u>06/30/2005</u>	Page17_ of77
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	1265511

NAME OF FILER

Pat Bates for Supervisor

THE DUCES FOR SUPERVISOR		•		120:	2211		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	۱ ۱	ELECTION TO DATE REQUIRED)
03/10/2005	Daniel T. Stetson	⊠IND □COM □OTH □PTY □SCC	COO . Ocean Institute	125.00	125.00	P 06	125.00
03/10/2005	Western Flooring Associates	□IND □COM □OTH □PTY □SCC		200.00	200.00	P 06	625.00
03/10/2005	John S. Williams	IND COM OTH PTY	Trustee	200.00	700.00	P 06	1,200.00
03/10/2005	Craig Zacuto	☑IND □COM □OTH □PTY □SCC	Administrator Beta Foster Care	125.00	125.00	P 06	125.00
03/11/2005	Human Performance Institute	☐IND ☐COM ☑OTH ☐PTY ☐SCC		125.00	125.00	P 06	125.00
			SUBTOTAL	775.00			

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SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from <u>01/01/2005</u>	FORM 460
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NAME OF FILER

Pat Bates for Supervisor

			 		1.	65511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE F REQUIRED)
03/11/2005	Susan J. Pesavento	⊠IND □COM □OTH □PTY □SCC	Owner Jewlery Designs by Susan	125.00	125.0	P 06	125.00
03/23/2005	Deloitte & Touche Partners CA Fund	□IND □OTH □PTY □SCC		350.00	350.(0 P06	350.00
03/23/2005	Family Honda	□IND □COM ☑OTH □PTY □SCC	·	1,400.00	1,400.0	0 P06	1,400.00
03/23/2005	Charlene Hatakeyama	☑IND □COM □OTH □PTY □SCC	Insurance Agent State Farm Insurance	125.00	125.0	0 P06	125.00
03/23/2005	KPMG LLP	□IND □COM ☑OTH □PTY □SCC		350.00	350.0	0 P 06	1,350.00
			SUBTOTAL!	2.350 00		al Alive	

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from01/01/2005	CALIFORNIA 460
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NAME OF FILER

Pat Bates for Supervisor

1265511

Pat Bates for Supervisor		•		1265511			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
03/23/2005	Stephen J. Lendino	☑IND □COM □OTH □PTY □SCC	President . Yellow Page Media	200.00	200.00	P 06	652.00
03/23/2005	M A Francis & Assoc, Inc	□IND □COM □OTH □PTY □SCC		200.00	200.00	P 06	300.00
03/23/2005	Ken Maddox	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Consultant Maddox Government Relations	100.00	150.00	P 06	150.00
03/23/2005	Larry A. Porter	⊠IND □COM □OTH □PTY □SCC	Vice President Merrill Lynch Life Agency	250.00	250.00	P 06	250.00
03/23/2005	PriceWaterhouseCoopers	☐IND ☐COM ☑OTH ☐PTY ☐SCC		-250.00	100.00	P 06	1,500.00
			SUBTOTAL	500.00		ilan-ira	

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Reed L. Royalty

Sheldon Public Relations

C. Michael Stockstill

United Agricultural PAC (#861050)

Willows Investment Group, LLC

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

Type or print in Ink.

Amounts may be rounded to whole dollars.

CONTRIBUTOR

MIND

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	california 460
through _06/30/2005	Page 20 of 77
	I.D. NUMBER
•	1265511

NAME OF FILER

DATE

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03/23/2005

03/23/2005

03/23/2005

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03/23/2005

Pat Bates for Supervisor

IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** PER ELECTION **RECEIVED THIS** OCCUPATION AND EMPLOYER CALENDAR YEAR TODATE (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) President P 06 250.00 250.00 250.00 Reed Royalty Public Relations 125.00 125.00 P 06 125.00 Vice President 150.00 150.00 P 06 150.00

100.00

250.00

□PTY □SCC			
	SUBTOTAL\$	875.00	

California Strategies

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FPPC Form 460 (January/05) FPPC Toli-Free Helpline: 866/ASK-FPPC (866/275-3772)

100.00

350.00

P 06

P 06

1,500.00

350.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from 01/01/2005	FORM 400
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NAME OF FILER

Pat Bates for Supervisor

	- Dupot 1101		•		126	5511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE ±	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
03/28/2005	PriceWaterhouseCoopers	□IND □COM ☑OTH □PTY □SCC	•	350.00	100.00	P 06	1,500.00
04/15/2005	Griffin House	□IND □COM □OTH □PTY □SCC		500.00	500.00	P 06	500.00
04/18/2005	Timothy Busch	☑IND □COM □OTH □PTY □SCC	Attorney The Busch Firm	100.00	100.00	P 06	1,,500.00
04/18/2005	CA Business Properties Association PAC (#850288)	□IND □COM □OTH □PTY □SCC		500.00	500.00	P 06	500.00
04/18/2005	Cox Communications, Inc.	□IND □COM ☑OTH □PTY □SCC		100.00	100.00	P 06	1,500.00
			SUBTOTAL	1 550 00			9. Tan 1988

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SCHEDULE A (CONT.)

Statement covers period from01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	_ Page of77
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	1265511

NAME OF FILER

Pat Bates for Supervisor

rac Baces 10	r Supervisor				126	5511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	l	R ELECTION TO DATE REQUIRED)
04/18/2005	PacificCare	□IND □COM □OTH □PTY □SCC		100.00	100.00	P 06	1,500.00
04/18/2005	Tel Phil Enterprises, Inc.	□IND □COM ☑OTH □PTY □SCC	·	125.00	125.00	P 06	125.00
04/18/2005	The Family Action PAC (#1225424)	□IND . □COM □OTH □PTY □SCC		1,500.00	1,250.00	P 06	1,500.00
04/18/2005	The Family Action PAC (#1225424)	□IND □COM □OTH □PTY □SCC		-250.00	1,250.00	P 06	1,500.00
04/18/2005	Vandermost Consulting Services, Inc.	□IND □COM ☑OTH □PTY □SCC	·	99.00	198.00	P 06	598.00
			SUBTOTAL	1,574.00			

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SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
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	1265511

NAME OF FILER

Pat Bates for Supervisor

·			•		126:	2211	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE REQUIRED)
04/18/2005	Vandermost Consulting Services, Inc.	□IND □COM □OTH □PTY □SCC	•	99.00	198.00	P 06	598.00
05/06/2005	Madeline G. Anderson	□ IND □ COM □ OTH □ PTY □ SCC	Retired . None	100.00	100.00	P 06	100.00
05/06/2005	Michael J. Bartlett	IND COM OTH PTY	Partner Blue Water Realty	250.00	375.00	P 06	375.00
05/06/2005	Imogen Beattie	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
05/06/2005	Joan C. Annes	IND COM OTH PTY SCC	Partner Annes & Associates	100.00	100.00	P 06	100.00
-			SUBTOTAL	540.00	in the special property		

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Statement covers period from01/01/2005	CALIFORNIA 460				
through06/30/2005	Page24 of77				
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NAME OF FILER

Pat Bates for Supervisor

1265511

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TO	ELECTION O DATE EQUIRED)
05/06/2005	Don Beaver	⊠IND □COM □OTH □PTY □SCC	Retried None	100.00	100.00	P 06	125.00
05/06/2005	Dave Black	□IND □COM □OTH □PTY □SCC	Manager City of Orange	100.00	100.00	P 06	100.00
05/06/2005	Richard D. Brame	IND COM OTH PTY	Retired None	100.00	100.00	P 06	100.00
05/06/2005	William Broza	⊠IND □COM □OTH □PTY □SCC	Banker Washington Mutual Bank	350.00	350.00	P 06	1,500.00
05/06/2005	C.V.R. Inc./Thomas W. Hribar	□IND □COM ☑OTH □PTY □SCC		50.00	175.00	P 06	175.00
			SUBTOTAL	\$ 700.00		i i	

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SCH	FDU	IFA	(CONT.)

Statement covers period from01/01/2005	california 460
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	1265511

NAME OF FILER

Pat Bates for Supervisor

rue buces ro	i Supervisor		•	t	126:	2211	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	To	ELECTION DDATE EQUIRED)
05/06/2005	Theodore J. Caliendo	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Physician Theodore Caliendo MD	100.00	100.00	P 06	100.00
05/06/2005	Mark Chandik	□IND □COM □OTH □PTY □SCC	Owner Financial Diligence Partners	500.00	500.00	P 06	500.00
05/06/2005	Lloyd Charton	☑IND □COM □OTH □PTY □SCC	Retired None	250.00	250.00	P 06	250.00
05/06/2005	Mark A. Cofano	☑IND □COM □OTH □PTY □SCC	Chief Information Officer InvesData Systems	100.00	100.00	P 06	100.00
05/06/2005	Ed Conway	IND COM OTH PTY	Executive ERA Fine Homes	100.00	100.00	P 06	100.00
			SUBTOTAL	1,050.00	Seal or go describe and apply the	1 2 3 4 5 5	

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SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION O DATE REQUIRED)
05/06/2005	Bob Ferguson	☑IND □COM □OTH □PTY □SCC	Owner Bob Ferguson-Independent	100.00	100.00	P 06	600.00
05/06/2005	Roy F. Dohner	□IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
05/06/2005	Jacques Gendreau	IND COM OTH PTY	Investment Advisor Jacques Gandreau Investments	100.00	100.00	P 06	100.00
05/06/2005	Earl D. Donaldson	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
05/06/2005	Patricia Fairbanks	☑IND □COM □OTH □PTY □SCC	Retired ·	100.00	100.00	P 06	100.00
			SUBTOTAL	\$ 500.00			ANNE E

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TC	ELECTION DATE EQUIRED)
05/06/2005	Robert Gillies	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	200.00
05/06/2005	Elizabeth A. Hart	□IND □COM □OTH □PTY □SCC	Homemaker None	500.00	500.00	P 06	500.00
05/06/2005	Christine Hess	IND COM OTH PTY	Executive Point Center Financial, Inc.	200.00	200.00	P 06	200.00
05/06/2005	Albert Iten	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	P 06	300.00
05/06/2005	Howard Communications	☐IND ☐COM ☑OTH ☐PTY ☐SCC		200.00	200.00	P 06	200.00
			SUBTOTAL	\$ 1,100.00			in Significan

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
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NAME OF FILER

Pat Bates for Supervisor

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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 31	R	PER ELEC TO DA (IF REQU	TE
05/06/2005	Michelle C. Johnson	⊠IND □COM □OTH □PTY □SCC	Partner M. Johnson & Associates, Inc.	500.00	500		9 06	500.00
05/06/2005	Mary S. Jefferies	□IND □COM □OTH □PTY □SCC	Real Estate Sales Prudential	75.00	175	.00 P	2 06	175.00
05/06/2005	Donna K. Kalez	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Proprietor Dana Wharf Sport Fishing	250.00	250	.00 E	2 06	250.00
05/06/2005	Carlos C. Kepner	⊠IND □COM □OTH □PTY □SCC	President Schleppy's	250.00	250	.00 I	P 06	250.00
05/06/2005	Tristan Krogius	□IND □COM □OTH □PTY □SCC	Retired .	100.00	300	.00	P 06	600.00
			SUBTOTALS	1.175 00				

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded to whole dollars.

SCHED	JLE A	(CONT.
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Statement covers period	CALIFORNIA ACO				
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NAME OF FILER

Pat Bates for Supervisor

1265511

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TO	LECTION DATE EQUIRED)
05/06/2005	Tracy D. Lewis	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
05/06/2005	C. Richard Mac Nair	□IND □COM □OTH □PTY □SCC	Retired None	150.00	150.00	P 06	150.00
05/06/2005	Ken Maddox	IND COM OTH SCC	Consultant Maddox Government Relations	50.00	150.00	P 06	150.00
05/06/2005	Robert Donald McIntyre	IND COM OTH PTY SCC	Attorney Law Offices of R. Donald McIntyre	100.00	100.00	P 06	100.00
05/06/2005	Larry McKenney	⊠IND □COM □OTH □PTY □SCC	Manager County of Orange	100.00	100.00	P 06	250.00
			SUBTOTAL	500.00			

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	california 460 FORM
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•	1265511

NAME OF FILER

Pat Bates for	Supervisor					1203312		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE (EQUIRED)	
05/06/2005	Robert J. Miller	☑IND □COM □OTH □PTY □SCC	Retired None	250.00	250.00	P 06	250.00	
05/06/2005	Norman P. Murray	□ IND □ COM □ OTH □ PTY □ SCC	Retired None	100.00	100.00	P 06	100.00	
05/06/2005	NAIOP PAC (#950520)	□IND □COM □OTH □PTY □SCC		250.00	250.00	P 06	1,250.00	
05/06/2005	Robert S. Neprud	☑IND □COM □OTH □PTY □SCC	Executive Pointe Center Financial	100.00	100.00	P 06	100.00	
05/06/2005	Paul J. O'Brien	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00		100.00	
			SUBTOTAL	.\$ 800.00		Marine III	t heta pe jer	

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Statement covers period from01/01/2005	CALIFORNIA 460
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NAME OF FILER

Pat Bates for Supervisor

AMOUNT IF AN INDIVIDUAL, ENTER CUMULATIVE TO DATE PER ELECTION

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1 - DEC. 31)		TO DATE REQUIRED)
05/06/2005	Forrest F. Owen	⊠IND □COM □OTH □PTY □SCC	Retired None	500.00	825.00	P 06	825.00
05/06/2005	Pacific Environmental Planning	□IND □COM □DOTH □PTY □SCC		100.00	225.00	P 06	225.00
05/06/2005	Tom F. Patty	IND COM OTH SCC	Retired None	100.00	100.00	P 06	100.00
05/06/2005	John Saunders	⊠IND □COM □OTH □PTY □SCC	President Saunders Property Co.	100.00	975.00	P 06	1,075.00
05/06/2005	Marie A. Siegel	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Natural Sources, Inc.	100.00	100.00	P 06	100.00
			SUBTOTAL	900.00	all the state of t	i Perent	erezekilő pilt

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SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	то	LECTION DATE QUIRED)
05/06/2005	Bruce I. Smith	☑IND □COM □OTH □PTY □SCC	Retired None	50.00	125.00	P 06	125.00
05/06/2005	Julie L. Stevens	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Realtor Coldwell Banker	100.00	100.00	P 06	100.00
05/06/2005	Joseph P. Stewart	□ IND □ COM □ OTH □ PTY □ SCC	Retired None	150.00	150.00	P 06	150.00
05/06/2005	The Kathy Barnum Agency, Inc.	□IND □COM ☑OTH □PTY □SCC		100.00	150.00	P 06	150.00
05/06/2005	Robert C. Theel	☑IND □COM □OTH □PTY □SCC	Executive Metro RCT, Inc.	150.00	150.00	P 06	150.00

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
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Pat Bates for Supervisor

1265511

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TC	ELECTION DATE EQUIRED)
05/06/2005	Gilbert G. Thibault	☑IND □COM □OTH □PTY □SCC	Realtor Prudential	100.00	100.00	P 06	100.00
05/06/2005	Willows Investment Group, LLC	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00	350.00	P 06	350.00
05/15/2005	Kathleen Blackburn	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
05/15/2005	Thomas Brabeck	⊠IND □COM □OTH □PTY □SCC	Real Estate REMax	100.00	100.00	P 06	100.00
05/15/2005	Mary A. Crowl	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	P 06	100.00
			SUBTOTAL	\$ 500.00			in the Total

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SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

Pat Bates fo	r Supervisor				1265	211	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TC	ELECTION DATE EQUIRED)
05/15/2005	James L. Davy	⊠IND □COM □OTH □PTY □SCC	Owner Davy Associates	200.00	200.00	P 06	200.00
05/15/2005	Richard E. Dietmeier	∏IND □COM □OTH □PTY □SCC	Retired	50.00	175.00	P 06	175.00
05/15/2005	Margaret F. Harrison	□IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	P 06	100.0
05/15/2005	Heredia Industries	☐IND ☐COM ☑OTH ☐PTY ☐SCC		100.00	100.00	P 06	100.0
05/15/2005	Patricia B. MacDonald	⊠IND □COM □OTH □PTY □SCC	Retired ·	100.00	300.00	P 06	300.0
			SUBTOTAL	\$ 550.00			n, tig til tig sati

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SCHEDULE A (CONT.)

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Pat Bates for Supervisor

at Bates for Supervisor			· .			1265511		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
05/15/2005	Joanne C. Mays	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	100.00	P 06	100.00	
05/15/2005	George J. Pagano	□IND □COM □OTH □PTY □SCC	Real Estate Broker Prudential CA Realty	250.00	375.00	P 06	875.00	
05/15/2005	Guy Schmidt	□IND □COM □OTH □PTY □SCC	Auto Dealer Guy Schmidt Inc	200.00	200.00	P 06	200.00	
05/15/2005	Constance Scofield	IND COM OTH PTY SCC	Homemaker None	100.00	100.00	P 06	100.00	
05/15/2005	William J. Stevens	IZIND COM OTH PTY SCC	Retired None	100.00	100.00	P 06	100.00	
			SUBTOTAL	700.00	ir score service participant			

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SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

1265511

at Baces for Supervisor							
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
05/15/2005	The Kathy Barnum Agency, Inc.	□IND □COM □OTH □PTY □SCC	•	50.00	150.00	P 06	150.00
05/15/2005	Franklin D. Tucker	□ IND □ COM □ OTH □ PTY □ SCC	Retired None	100.00	100.00	P 06	100.00
05/15/2005	Judith Ware	□IND □COM □OTH □PTY □SCC	President Madison Materials	500.00	500.00	P 06	500.0
05/18/2005	Glenn Peter Aga	☑IND □COM □OTH □PTY □SCC	President IC Associates, LLC	200.00	200.00	P 06	200.0
05/18/2005	Applied Research Services	□IND □COM ☑OTH □PTY □SCC		750.00	750.00	P 06	750.0
			SUBTOTAL	\$ 1,600,00		Trace (Par	

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Robert T. Best

Donald S. Clem

Dana Island Beach House, Inc.

Hall & Foreman, Inc.

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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Statement covers period	CALIFORNIA AGO
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NAME OF FILER

DATE

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05/18/2005

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05/18/2005

Pat Bates for Supervisor

1265511 AMOUNT **CUMULATIVE TO DATE** PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR **TO DATE RECEIVED THIS** CALENDAR YEAR OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF REQUIRED) (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) OF BUSINESS) P 06 1,500.00 Austin-Foust Associates, Inc. ПСОМ 1,500.00 1,500.00 **MTO** □ PTY □scc VIND 1,500.00 1,500.00 P06 1,500.00 Retired □сом **□ОТН** None □ PTY □scc **☑**IND 250.00 250.00 250.00 Day Trader СОМ Потн Donald S. Clem □ PTY □scc

250.00

1,000.00

•	☐ PTY ☐ SCC		
	□COM □OTH □PTY		

□IND

ПСОМ **MTO** □ PTY □scc

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SCC - Small Contributor Committee

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

250.00

1,000.00 P06

1,500.00

1,000.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

Pat Bates for	r Supervisor					JJ11		
DATE: RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMFLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)	
05/18/2005	Gary Capata	⊠IND □COM □OTH □PTY □SCC	CPA Capata & Co	225.00	350.00	P 06	1,500.00	
05/18/2005	Harry Cheshire	□IND □COM □OTH □PTY □SCC	Retired None	125.00	325.00	P 06	1,225.00	
05/18/2005	GPM Management Services Corp	□IND □COM ☑OTH □PTY □SCC		125.00	250.00	P 06	500.00	
05/18/2005	Harrison & Holland, Inc.	□IND □COM ☑OTH □PTY □SCC		750.00	750.0	P 06	750.00	
05/18/2005	Michael K. Hayde	⊠IND □COM □OTH □PTY □SCC	CEO . Western National Group	1,500.00	1,500.0	P 06	1,500.00	
		· · · · · · · · · · · · · · · · · · ·	SUBTOTAL	\$ 2,725.00	pat, replace and the second se			

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NAME OF FILER

Pat Bates for Supervisor

Pat Bates 10	at Bates for Supervisor		.•				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION O DATE (EQUIRED)
05/18/2005	Mark D. Hulme	⊠IND □COM □OTH □PTY □SCC	Commercial Real Estate Westar Realty	1,500.00	1,500.00	P 06	1,500.00
05/18/2005	Hunsaker & Associates	□IND □COM □OTH □PTY □SCC		1,100.00	1,100.00	P 06	1,500.00
05/18/2005	James F. McConnell Attorney at Law	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
05/18/2005	JES Engineering Contractors, Inc.	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.00	P 06	1,500.00
05/18/2005	Steven Kellenberg	⊠IND □COM □OTH □PTY □SCC	Urban Planner	750.00	750.00	P 06	750.00
			SUBTOTAL	\$ 5,100.00			

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Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	ELECTION TO DATE REQUIRED)
05/18/2005	Peter J. Koetting	⊠IND □COM □OTH □PTY □SCC	Commercial Real Estate Westar Realty	1,500.00	1,500.00	P 06	1,500.00
05/18/2005	T.D. McMahon	□ IND □ COM □ OTH □ PTY □ SCC	Commercial Real Estate Grubb & Ellis	200.00	200.00	P 06	350.00
05/18/2005	Susan K. Ming	□IND □COM □OTH □PTY □SCC	Attorney Jefferies & Company, Inc.	200.00	200.00	P 06	200.00
05/18/2005	Theresa C. Morrison	☑IND □COM □OTH □PTY □SCC	Real Estate William J. Cagney Trust	500.00	500.00	P 06	500.00
05/18/2005	OCB Reprographics	□IND □COM ☑OTH □PTY □SCC	·	1,500.00	1,500.00	P 06	1,500.00
		<u></u>	SUBTOTAL	\$ 3,900.00	7,015 to 17 miles	K ing i	

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SCHEDULE A (CONT.)

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NAME OF FILER

Pat Bates for Supervisor

1265511 IF AN INDIVIDUAL, ENTER **AMOUNT CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE RECEIVED THIS CALENDAR YEAR OCCUPATION AND EMPLOYER TODATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **DIND** 05/18/2005 Rainbow Disposal Co, Inc. P 06 1,500.00 СОМ 1,500.00 1,500.00 MOTH □ PTY □scc DIND 05/18/2005 Robert R. Sinclair Retired 100.00 100.00 P 06 100.00 СОМ **⊟**отн None □ PTY ☐ SCC **☑IND** 05/18/2005 Donald E. Smith Urban Planner 750.00 750.00 P 06 750.00 ПСОМ **□**ОТН EDAW □PTY □scc 05/18/2005 Tait & Associates, Inc. 250.00 250.00 250.00 ПСОМ MTO[X] PTY □scc ☐IND 05/18/2005 The Jasper Companies 1,500.00 1,500.00 1,500.00 ПСОМ **₩**OTH □ PTY SCC SUBTOTAL \$

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Pat Bates for Supervisor

1265511

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	TO	ELECTION DATE EQUIRED)
05/18/2005	Susan M. Trager	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Law Offices of Susan M. Trager	250.00	250.00	₽ 06	250.00
05/18/2005	Donna G. Varner	□IND □COM □OTH □PTY □SCC	Owner Perception Public Relations	125.00	125.00	P 06	125.00
05/18/2005	W. Paul Whitelock	IND COM OTH SCC	Realtor Re/Max Realty	200.00	200.00	P 06	200.00
06/02/2005	Michael Abdalla	⊠IND □COM □OTH □PTY □SCC	Physician Michael Abdalla MD	500.00	500.00	P 06	500.00
06/02/2005	Adams Steel	☐IND ☐COM ☑OTH ☐PTY ☐SCC	·	250.00	250.00	P 06	250.00
			SUBTOTAL	\$ 1,325.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE /	A (CONT.)
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Statement covers period from 01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	Page 43 of 77
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	1	RELECTION TO DATE REQUIRED)
06/02/2005	BAS Brian A. Stirrat & Associates	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Brion May Consulting	□IND □COM □OTH □PTY □SCC		1,250.00	1,500.00	P 06	1,500.00
06/02/2005	C J Segerstrom & sons	IND COM OTH PTY		1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Caltrop	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,500.00	P 06	1,500.0
06/02/2005	CH2MHill Inc	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.0

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from 01/01/2005 through 06/30/2005	Page44 of77
	I.D. NUMBER

NAME OF FILER

Pat Bates for	r Supervisor				1263		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		RELECTION TO DATE REQUIRED)
06/02/2005	Fieldstead & Company	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Geo Syntec Consultants	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
06/02/2005	Robert S. Iger	☑IND □COM □OTH □PTY □SCC	Consultant Iger & Associates	250.00	250.00	P 06	250.00
06/02/2005	Iger & Associates	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.0
06/02/2005	Katelaris Farm Nursery Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.00	P 06	1,000.0
SUBTOTAL\$ 3,250.00							

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Type or print in ink.

Amounts may be rounded to whole dollars.

SCH	EDU	LE A	CON	(T)

Statement covers period from 01/01/2005	california 460
through _06/30/2005	Page 45 of 77
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	1265511

NAME OF FILER

Pat Bates for Supervisor

	r adberateor						
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		RELECTION TO DATE REQUIRED)
06/02/2005	Kishin Khilnani	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Engineer Advanced Earth Sciences Inc	500.00	500.0	P 06	500.00
06/02/2005	Carollyn B. Lobell	□IND □COM □OTH □PTY □SCC	Attorney Nossaman, Guthner, Knox & Elliott	250.00	250.0	P 06	250.00
06/02/2005	LSA Associates, Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	250.0	D P 06	250.00
06/02/2005	L. David Markley	⊠IND □COM □OTH □PTY □SCC	Program Manager Goodrich Power Systems	250.00	250.0	0 P06	250.00
06/02/2005	Maximus	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,500.0	0 P 06	1,500.00
			SUBTOTAL	2,750.00			

*Contributor Codes

IsubivibnI - QNI

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from $\frac{01/01/2005}{1/01/2005}$ CALIFORNIA FORM 460

through $\frac{06/30/2005}{1/01/2005}$ Page $\frac{46}{1/01}$ of $\frac{77}{1/01/2005}$

NAME OF FILER

Pat Bates for Supervisor

1265511

I.D. NUMBER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE EQUIRED)
06/02/2005	Chester L. Noblett Jr.	☑IND □COM □OTH □PTY □SCC	Executive Vice President	250.00	250.00	P 06	250.00
06/02/2005	PCI Parking Concepts, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Philip L. Anthony Inc	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	400.00
06/02/2005	R.M.C., Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
06/02/2005	Ralph Allen & Partners, Architects	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
			SUBTOTAL	\$ 2,500.00			

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
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Pat Bates for Supervisor

1265511

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	ļ ·	RELECTION TO DATE REQUIRED)
06/02/2005	Rick Goacher Planning Inc	□IND □COM □PTY □SCC		1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Sapetto Group Inc	□IND □COM □OTH □PTY □SCC		250.00	250.00	P 06	250.00
06/02/2005	John Saunders	☑IND □COM □OTH □PTY □SCC	President Saunders Property Co.	250.00	975.00	P 06	1,075.00
06/02/2005	Simplus Management Corporation	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
06/02/2005	Southland Development Company Inc	□IND □COM ☑OTH □PTY □SCC		150.00	150.00	P 06	150.0
			SUBTOTAL	\$ 2,400.00		V	

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SCHEDULE A (CONT.)

Statement covers period from01/01/2005	CALIFORNIA 460
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NAME OF FILER

Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		RELECTION TO DATE REQUIRED)
06/02/2005	Taormina Industries, LLC	□IND □COM ☑OTH □PTY □SCC	•	1,500.00	1,500.00	P 06	1,500.00
06/02/2005	Three Star Nursery Inc	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	P 06	250.00
06/02/2005	John S. Williams	IND COM OTH PTY	Trustee SOCCCD	500.00	700.00	P 06	1,200.00
06/09/2005	Patricia A. Aston	⊠IND □COM □OTH □PTY □SCC	Retired None	200.00	400.00	P 06	700.00
06/09/2005	John Biggar	`⊠IND □COM □OTH □PTY □SCC	Retired . None	200.00	200.00	P 06	200.00
			SUBTOTAL	\$ 2,650.00	2477 L 10 H 5	erna eri ak	are eller eller de

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Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)	SCHED	ULE A	(CONT.)
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Statement covers period	CALIFORNIA 160				
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through <u>06/30/2005</u>	Page49 of77				
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	1265511				

NAME OF FILER

at Bates for	r Supervisor		•				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERILD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	то	LECTION DATE QUIRED)
06/09/2005	Birkeland & Associates	□IND □COM ☑OTH □PTY □SCC		100.00	100.00	P 06	200.00
06/09/2005	Bristol Farms Inc	☐IND ☐COM . ☐OTH ☐PTY ☐SCC		200.00	200.00	P 06	200.00
06/09/2005	Gwen G Brown	☑IND □COM □OTH □PTY □SCC	Homemaker None	200.00	200.00	P 06	200.00
06/09/2005	Lillian Cox	☑IND □COM □OTH □PTY □SCC	Retired None	125.00	125.00	P 06	125.00
06/09/2005	G Wayne Eggleston	⊠IND □COM □OTH □PTY □SCC	Real Estate Appraiser G Wayne Eggleston	125.00	125.00	P 06	125.00
			SUBTOTAL	L\$ 750.00			

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SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from 01/01/2005	FORM TOU
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	1265511

NAME OF FILER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DEC.	AR	T	ELECTION TO DATE REQUIRED)
06/09/2005	Gabriel Ferrucci	⊠IND □COM □OTH □PTY □SCC	Retired None	1,500.00	1,50	0.00	P 06	1,500.00
06/09/2005	Robert Firks	□ IND □ COM □ OTH □ PTY □ SCC	Retired None	200.00	20	0.00	P 06	200.00
06/09/2005	Susan Hart	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker None	125.00	12	25.00	ያ 06	125.00
06/09/2005	Jack C Hennings	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Consultant Jack Hennings	125.00	1:	25.00	P 06	125.00
06/09/2005	Hodge & Associates	□IND □COM □OTH □PTY □SCC	·	125.00	1	25.00	P 06	125.00

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SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from 01/01/2005	FORM 400
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NAME OF FILER

Pat Bates for Supervisor

1265511 AMOUNT IF AN INDIVIDUAL, ENTER **CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE **RECEIVED THIS** OCCUPATION AND EMPLOYER CALENDAR YEAR TODATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) OF BUSINESS) 06/09/2005 Laguna Board of Realtors P 06 200.00 □сом 200.00 200.00 MOTH **□**PTY □scc **☑IND** 06/09/2005 Michael C Lowther Retired 1,500.00 1,500.00 P 06 1,500.00 ПСОМ □ OTH None □ PTY □scc **WIND** 06/09/2005 Patricia B. MacDonald Retired 200.00 300.00 P 06 300.00 ПСОМ Потн None PTY □scc 06/09/2005 Minagar & Associates Inc 200.00 200.00 P 06 200.00 СОМ MTO 🗹 □ PTY □scc 06/09/2005 Nossaman Guthner Knox & Elliott 100.00 100.00 P 06 1,500.00 □сом **₩OTH** PTY □scc SUBTOTAL \$

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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

2,200.00

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	Page52_ of77
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	1265511

NAME OF FILER

Pat Bates for Supervisor

AMOUNT PER ELECTION IF AN INDIVIDUAL, ENTER **CUMULATIVE TO DATE** FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR DATE OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TODATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) (IF REQUIRED) RECEIVED PERIOD (JAN. 1 - DEC. 31) XIND Retired P 06 825.00 06/09/2005 Forrest F. Owen □сом 125.00 825.00 **□отн** None PTY □scc **☑IND** 325.00 Public Admin Guardian 125.00 P 06 325.00 06/09/2005 Nancy Padberg СОМ Потн County of Orange PTY SCC **☑IND** Marketing Consultant 200.00 200.00 P 06 200.00 Ronald Perrella 06/09/2005 ПСОМ Потн Ron Perrella DRS □PTY □scc **☑IND** Retired 06/09/2005 S. T. Pestritto 125.00 125.00 P 06 125.00 ПСОМ Потн None □PTY □scc 06/09/2005 Rietsch Enterprises Inc 125.00 125.00 P 06 125.00 ПСОМ ₩отн □ PTY □scc SUBTOTAL \$

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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

700.00

Type or print in ink.

Amounts may be rounded to whole dollars.

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	california 460
through <u>06/30/2005</u>	_ Page53_ of77
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	1265511

NAME OF FILER

Pat Bates for Supervisor

AMOUNT **CUMULATIVE TO DATE** PER ELECTION IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS TODATE DATE CALENDAR YEAR OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * PERIOD (IF REQUIRED) RECEIVED (IF SELF-EMPLOYED, ENTER NAME (JAN. 1 - DEC. 31) OF BUSINESS) **IND** P 06 200.00 Attorney 06/09/2005 Donna Schwarm ПСОМ 200.00 200.00 Потн OC Deputy District **□PTY** Attorney □scc MIND 06/15/2005 Art Judice Family Billiards, Inc. - Games Plus 1,500.00 1,500.00 1,500.00 СОМ **₩**OTH □ PTY □scc DIND 06/15/2005 Louis Brutocao President 1,500.00 1,500.00 1,500.00 ПСОМ Потн The Brutoco Companies □ PTY □scc **DNI** Realtor 06/15/2005 Joan E. Burt 100.00 100.00 P 06 100,00 □сом □отн Associated Realtors **□PTY** □scc **X**IND Executive 06/15/2005 Ed Conway 150.00 100.00 P 06 100.00 ПСОМ □отн ERA Fine Homes □ PTY □scc

SUBTOTAL \$

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Type or print in ink.

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SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from01/01/2005 through06/30/2005	Page54 of77
	I.D. NUMBER 1265511

NAME OF FILER

DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	т	ELECTION O DATE EQUIRED)
RECEIVED 06/15/2005	Hardy & Harper, Inc.	□IND □COM □OTH □PTY	Of Brown Coop	1,500.00	1,500.00	P 06	1,500.00
06/15/2005	David L. Horowitz	SCC	Executive Horowitz Management, Inc.	1,500.00	1,500.00	P 06	1,500.00
06/15/2005	Michael J. Kartsonis	□IND □COM □OTH □PTY □SCC	Executive Dynamic Fab, Inc.	100.00	100.00	P 06	100.00
06/15/2005	Gary R. Kurtz	IXIND COM OTH PTY SCC	Retired	125.00	125.00	P 06	125.0
06/15/2005	John Saunders	□ IND □ COM □ OTH □ PTY □ SCC	President . Saunders Property Co.	500.00			1,075.0
			SUBTOTAL	-\$ 3,725.00	un esperimente de la companie de la	R aini k	

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SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460				
through <u>06/30/2005</u>	Page55 of77				
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	1265511				

NAME OF FILER

Pat Bates for Supervisor

	1 Supervisor				1	265511	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE F REQUIRED)
06/15/2005	Hans Sommer	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.0	P 06	100.00
06/15/2005	David Valentine	□ IND □ COM □ OTH □ PTY □ SCC	Physical Therapist SCOR Physical Therapy	100.00	100.0	0 P06	100.00
06/15/2005	Vintage Marina	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.0	0 P 06	1,500.0
06/15/2005	William M. Crawford Co., Inc.	□IND □COM ☑OTH □PTY □SCC		100.00	100.0	0 P06	100.00
06/24/2005	Ed Conway	☑IND □COM □OTH □PTY □SCC	Executive ERA Fine Homes	-150.00	100.0	0 P06	100.00
			SUBTOTAL	1,650.00			

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SCI	IFDL	#FA	(CONT.)

Statement covers period from 01/01/2005	california 460
through <u>06/30/2005</u>	Page56 of77
<u> </u>	I.D. NUMBER

NAME OF FILER

1265511 Pat Bates for Supervisor PER ELECTION AMOUNT **CUMULATIVE TO DATE** IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TODATE **RECEIVED THIS** CALENDAR YEAR DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF SELF-EMPLOYED, ENTER NAME (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) RECEIVED OF BUSINESS) **□IND** P 06 1,500.00 CA Healthcare Association PAC (#790773) 06/29/2005 **X**COM 100.00 100.00 □oтн PTY □scc MIND 625.00 P 06 874.00 500.00 Cofiroute Global Mobility, LLC 06/29/2005 ПСОМ MOTH □ PTY □scc 1,250.00 1,500.00 1,250.00 DOC PAC/Orange County Medical Assoc PAC 06/29/2005 **⊠**COM (#822271) ПОТН □ PTY □ scc 100.00 -25.00 1,500.00 06/29/2005 Doctor's Ambulance Service СОМ **₩**OTH PTY ∏scc 125.00 100.00 1,500.00 06/29/2005 Doctor's Ambulance Service ПСОМ **₩**OTH □ PTY ☐ SCC SUBTOTAL \$

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FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

1,950.00

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from01/01/2005	CALIFORNIA 460
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	1265511

NAME OF FILER

Pat Bates for Supervisor **CUMULATIVE TO DATE** PER ELECTION AMOUNT IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS CALENDAR YEAR TODATE OCCUPATION AND EMPLOYER DATE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * (IF REQUIRED) **PERIOD** (JAN. 1 - DEC. 31) (IF SELF-EMPLOYED, ENTER NAME RECEIVED OF BUSINESS) P 06 1,250.00 RBF Consulting 06/29/2005 СОМ 250.00 250.00 ₩ОТН **□**PTY □scc □IND 250.00 250.00 250.00 BIA of Southern CA PAC (#741733) 06/30/2005 **⊠**COM □отн □ PTY □scc **☑IND** 250.00 250.00 250.00 Attorney 06/30/2005 Mark Bucher СОМ Потн Law Offices of Mark □ PTY Bucher SCC MIND President 1,500.00 1,500.00 P 06 1,500.00 06/30/2005 Steven Bunge ПСОМ Потн Mission 1 Funding **□**PTY ⊓scc 500.00 500.00 1,500.00 06/30/2005 CA Housing Council PAC (#746544) **X**COM □отн □ PTY □scc

SUBTOTAL \$

2,750.00

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY ~ Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA ACO
from <u>01/01/2005</u>	FORM 40U
through <u>06/30/2005</u>	Page58_ of77
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** PER ELECTION FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE CONTRIBUTOR RECEIVED THIS OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CALENDAR YEAR TO DATE RECEIVED CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) **TIND** 06/30/2005 Capital Pacific Holdings Inc P 06 1,500.00 □сом 1,500.00 1,500.00 MTO 🔯 □PTY □scc 06/30/2005 Disney Worldwide Services Inc 250.00 250.00 P 06 250.00 ПСОМ HTO 🖸 PTY ☐ SCC 06/30/2005 **☑**IND Marcia Gabouy Homemaker 150.00 150.00 P 06 150.00 ПСОМ □OTH None **□**PTY □scc 06/30/2005 **VIND** Dan Harkey Owner 1,500.00 1,500.00 P 06 1,500.00 ПСОМ **□**ОТН Pointe Center Financial □ PTY □scc 06/30/2005 **VIND** John Paul Ledesma Sales 100.00 100.00 P06 100.00 ПСОМ Потн GI Tech Inc **□PTY** □ scc

SUBTOTAL \$

3,500.00

*Contributor Codes

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from01/01/2005	
through <u>06/30/2005</u>	Page of
	I.D. NUMBER
	1265511

NAME OF FILER

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	T	ELECTION O DATE REQUIRED)
Leighton Consulting Inc	□IND □COM □OTH □PTY		250.00	250.00	P 06	250.00
Linda Lindholm	DIND COM OTH PTY	Homemaker None	1,500.00	1,500.00	P 06	1,500.00
Makar Management LLC	☑IND □COM □OTH □PTY □SCC		1,500.00	1,500.00	P 06	1,500.00
Joanne C. Mays	□IND □COM □OTH □PTY □SCC	Retired	50.00	100.00	P 06	100.0
North American Investments LLC	□IND □COM □OTH □PTY □SCC		175.00	175.00	P 06	175.0
	Leighton Consulting Inc Linda Lindholm Makar Management LLC Joanne C. Mays	Leighton Consulting Inc Leighton Consulting Inc Linda Lindholm Linda Lindholm Makar Management LLC Joanne C. Mays North American Investments LLC IND CODE * IND COM IND IND IND IND IND IND IND IN	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTERID. NUMBER) Leighton Consulting Inc Linda Lindholm Linda Lindholm Makar Management LLC Joanne C. Mays North American Investments LLC CODE * COCUPATION AND EMPLOYER CODE * COCUPATION AND EMPLOYER CODE * COOM COM CO	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * COCUPATION AND EMPLOYER (IF SCIPENTION NUMBER) Leighton Consulting Inc Linda Lindholm Linda Lindholm Makar Management LLC Joanne C. Mays North American Investments LLC North American Investments LLC CONTRIBUTOR COORTINA AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTERNAME OF BUSINESS) PERIOD COCUPATION AND EMPLOYER OF BUSINESS PERIOD COMMITTED COM	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * OCCUPATION AND EMPLOYER (FEBRUARY PERIOD COLONAITIE, ALSO ENTERID, NAMBER) Leighton Consulting Inc Linda Lindholm Linda Lindholm Linda Lindholm Makar Management LLC Joanne C. Mays North American Investments LLC North American Investments LLC CONTRIBUTOR CODE * OCCUPATION AND EMPLOYER (PERIOD COLONAITIE, ALSO ENTERINAME OF BUSINESS) RECEIVED THIS PERIOD CALENDARY PERIOD COLONAITIE, ALSO ENTERINAME OF BUSINESS) RECEIVED THIS PERIOD CALENDARY	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE ** CONTRIBUTOR COCUPATION AND EMPLOYER RECEIVED THIS PERIOD CALENDAR YEAR (JAN. 1 - DEC. 31) Leighton Consulting Inc Leighton Consulting Inc Linda Lindholm Linda Lindholm Makar Management LLC MIND COM OTH PTY SCC Joanne C. Mays Joanne C. Mays North American Investments LLC North American Investments LLC CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR CONTRIBUTOR PERIOD CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, INTER CALENDAR YEAR (JAN. 1 - DEC. 31) IF AN INDIVIDUAL, INTER CALENDAR YEAR (JAN. 1 - DEC. 31) FRECEIVED THIS PERIOD CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADDRESS AND ZIP COLE OF CONTRIBUTOR CONTRIBUTOR CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm DON OTH PTY SCC JOANNE STREET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADDRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda Lindholm Linda Lindholm DON OTH PTY SCC JOANNE STREET ADRESS AND ZIP CALENDAR YEAR (JAN. 1 - DEC. 31) P 06 Linda Lindholm Linda

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 460
from <u>01/01/2005</u>	FORM TOO
through <u>06/30/2005</u>	Page60 of77
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	ĭ	ELECTION O DATE REQUIRED)
06/30/2005	Alban Powell-Stern	☑IND □COM □OTH □PTY □SCC	Financial Marketing Powell-Stern Marketing	500.00	500.00	P 06	500.00
06/30/2005	R. Hall Investment Properties	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,300.00	1,500.00	P 06	1,500.00
06/30/2005	Mario Rodriguez	□ IND □ COM □ OTH □ PTY □ SCC	Executive Johnathan Gray & Assoc	250.00	250.00	P 06	250.00
06/30/2005	S & S Construction Co	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,500.00	P 06	1,500.00
06/30/2005	Michael Schroeder	☑IND □COM □OTH □PTY □SCC	Attorney . Michael Schroeder Attorney at Law	500.00	500.00	P 06	500.00
			SUBTOTAL	\$ 4,050.00			

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from 01/01/2005	CALIFORNIA 460
through <u>06/30/2005</u>	Page61_ of77
	I.D. NUMBER

NAME OF FILER

Pat Bates for Supervisor

1265511

Bruce I. Smith	□IND □COM □PTY □SCC □SIND □COM □OTH □PTY □SCC	Retired None	100.00 75.00	125.00	P 06	1,500.00
	COM OTH PTY SCC	. •	75.00	125.00	P 06	125.00
Pohort I Waltors					1	
Robert o watters	□IND □COM □OTH □PTY □SCC	President FMI	500.00	500.00	P 06	500.00
Ronald Young	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	200.00	200.00	P 06	200.0
	□IND □COM □OTH □PTY □SCC					
R	onald Young	Donald Young Do	Donald Young PTY	Donald Young DIND Retired 200.00 COM DOTH None SCC DIND COM DOTH PTY DSCC SCC DIND COM DOTH PTY DSCC SCC SCIPTOTAL 6	PTY SCC PM PM PM PM PM PM PM	Onald Young IND

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

SC	HЕ	n	н	E	R.	. P	Δſ	ЭТ	1
3	111	u	JL	_	•	-	n	١.	

Schedule B - Part 1 **Loans Received**

SEE INSTRUCTIONS ON REVERSE

Type or print in ink. Amounts may be rounded to whole dollars.

Statemen	t covers period	CALIF	ORNIA	A /	160		
from	from01/01/2005		FORM 40				
through	06/30/2005	Page	62	of	77		
		I.D. NUA	MBER				
		1269	511				

NAME OF FILER						ļ	1265511	Ì
Pat Bates for Supervisor								
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b). AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Patricia Bates		1,000.00	0.00	9.00	\$	0.00% % RATE	\$	\$ 0.00 PER ELECTION** 206 1,000.00
TENT IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				\$ FORGIVEN	s	RATE	\$	\$PER ELECTION *
†□ IND □ COM □ OTH □ PTY □ SCC	~	s	\$	s	DATE DUE	\$	DATE INCURRED	\$
				PAID \$ FORGIVEN	\$		\$	\$PER ELECTION *
TO IND COM OTH PTY SCC		\$	<u> </u>	- s	DATE DUE	<u> </u>	DATE INCURRED	
		SUBTOTALS	\$ 0.00	\$ 0.00	\$ 1,000.00	\$ 0.00	MAN .	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
1. Loons received this period				\$	0.00	_		

•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1	Loans received this period	\$.	0.00
*•	(Total Column (b) plus unitemized loans of less than \$100.)		
2.	Loans paid or forgiven this period	\$.	0.00
3.	Net change this period. (Subtract Line 2 from Line 1.)	\$	0 . 00 (May be a negative number)

†Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Schedule C

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE C Statement covers period CALIFORNIA ACO

Nonmonetary Contributions Received		to whole dollars.			from 01/01/2005			FORM 460		
NAME OF FILER	NONS ON REVERSE R for Supervisor				throu	gh_06/30/2005		Page6:	ER	-
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	DA CALEND	TIVE TO TE AR YEAR DEC 31)	PER ELECTIO TO DATE (IF REQUIRED	
05/06/2005	Diane Harkey	⊠IND □COM □OTH □PTY □SCC	Councilwoman City of Dana Point	Event Caterin Costs	g	100.00		1,500.00	P 06 1,	,500.
		□IND □COM □OTH □PTY □SCC								
		□IND □COM □OTH □PTY □SCC		·						
		□IND □COM □OTH □PTY □SCC								
Attach a	dditional information on appropriately lal	oeled continua	ation sheets.	SUB	TOTAL \$	100.00			esta antique	
1. Amoun (Includ	le C Summary It received this period – itemized nonmonet e all Schedule C subtotals.)					100.00	INI	(other	ii ent Committee than PTY or SCC (e.g., business er	
3. Total ne	onmonetary contributions received this perions 1 and 2. Enter here and on the Summ	od.							Contributor Commi	ttee

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHE	DULEE
State	ment covers period	CALIFORNIA /	รก
from	01/01/2005	FORM	
through	06/30/2005	Page64 of77	
		I.D. NUMBER	
		1265511	

		through06/30/2005	Page 64	of			
SEE INSTRUCTIONS ON REVERSE			I.D. NUMBER				
NAME OF FILER			1265511				
Pat Bates for Supervisor							
CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events FND independent expenditure supporting/opposing others (explain)* OFC office expenpetition circul petition circul phone banks POL polling and significant properties of the polling and significant proper	munications I appearances ses ating	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and prod TRC candidate travel, lodging, and staff/spouse travel, lodging, TSF transfer between committees VOT voter registration WEB information technology costs	uction costs i meals and meals s of the same c	·			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DES	SCRIPTION OF PAYMENT		AMOUNT PAID			
Arroyo Trabuco Golf Club	FND	***************************************		8,275.85			
Sergio Prince	CNS			5,000.00			
Hennessey's Tavern	FND			1,387.39			
* Payments that are contributions or independent expenditures must also be sumr	narized on Schedule D.	S	UBTOTAL\$	14,663.24			
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedule E subtotals.)			\$	64,830.47			
	2. Unitemized payments made this period of under \$100						
	3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)						
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on	the Summary Page Column A	\ line 6.\ T(OTAL \$	64,914.39			
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on	tile Julillary Fage, Column	1, Euro 0./					

	(CONT.

Schedule	E
(Continua	tion Sheet)
Payments	Made

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

candidate filing/ballot fees

CNS campaign consultants

CVC civic donations

FND fundraising events

Type or print in ink. Amounts may be rounded to whole dollars.

MBR member communications

office expenses

phone banks

petition circulating

MTG meetings and appearances

POL polling and survey research

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

OFC

PET PHO

	SCHEDULE E (CONT.)					
Statement covers period from01/01/2005 through06/30/2005	CALIFORNIA 460					
from 01/01/2005	FORM HOU					
through06/30/2005	- Page 65 of 77					
	I.D. NUMBER					
	1265511					

RAD radio airtime and production costs

TEL t.v. or cable airtime and production costs

TRS staff/spouse travel, lodging, and meals

candidate travel, lodging, and meals

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor

IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PRO	professional print ads					lidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION OF PAYMENT	AMC	OUNT PAID
Hennessey's Tavern		· .	FN D				940.66
Paule Consulting, Inc.			FND				602.17
Paule Consulting, Inc.		** D. *********************************	CNS				1,720.11
Continuing the Republican Revolution (#598041)	· .		LIT	Sì	late Card		1,000.00
Betty Presley & Associates, Inc.			OFC				400.00
* Payments that are contributions or independent expenditures must	t also be su	mmarized on	Schedule	D.	SUBT	OTAL \$	4.662.94

4,662.94

Schedule E (Continuation Sheet) **Payments Made**

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

CNS campaign consultants

CVC civic donations

Type or print in ink. Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

PET petition circulating

MTG meetings and appearances

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

Statement covers period	CALIFORNIA 460
from 01/01/2005	FORM 400
through06/30/2005	Page66 of77
	I.D. NUMBER
	1265511

RAD radio airtime and production costs

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor

candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings	POL	phone banks polling and survey research postage, delivery and messenger ser professional services (legal, accounting print ads	TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sar voter registration WEB information technology costs (internet, e	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	-	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Paule Consulting, Inc.		CNS		612.57
Sergio Prince		CNS		5,000.00
Aliso Viejo Republican Women Federated		PRT		150.00
The Monaco Group		FND		1,819.38
Gilliard Blanning Wysocki & Associates		LIT		21,678.64
* Payments that are contributions or independent expenditures must	also be s	summarized on Schedule D.	· SUBTOTAL	\$ 29,260.59

Schedule E (Continuation Sheet) **Payments Made**

CMP campaign paraphernalia/misc.

CNS campaign consultants

Type or print in ink. Amounts may be rounded to whole dollars.

MBR member communications

MTG meetings and appearances

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from01/01/2005	FORM TOO
through06/30/2005	Page67 of77
	I.D. NUMBER
	1265511

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Pat Bates for Supervisor CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CTB contribution (explain nonmonetary)* CVC civic donations Fil. candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	PET		ating urvey resea very and m	arch essenger services egal, accounting)	TEL TRC TRS TSF VOT	campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the sam voter registration information technology costs (internet, e-	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTIO	ON OF PAYMENT	AMOUNT PAID
The Monaco Group		•	LIT				838.75
Diane Harkey			FND				811.93
Paule Consulting, Inc.			FND				2,593.93
Sergio Prince			CNS	•			5,000.00
The Monaco Group			LIT				382.09
* Payments that are contributions or independent expenditures must a	iso be s	ummarized o	n Schedule	D.		SUBTOTAL	\$ 9,626.70

SC	HEDL	II F	F	(COI	NT

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded to whole dollars

	SCHEDULL L (CONT.)
Statement covers period	CALIFORNIA 160
from01/01/2005	FORM 400
through 06/30/2005	Page 68 of 77
	I.D. NUMBER
	1265511

Payments Made	to whole donars.	from01/01/2005	FORM 100
SEE INSTRUCTIONS ON REVERSE		through 06/30/2005	Page68 of77
NAME OF FILER			I.D. NUMBER
Pat Bates for Supervisor			1265511
CODES: If one of the following codes accurate	ely describes the payment, you may enter the coo	de. Otherwise, describe the payment	•
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production	n costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions	
CTP contribution (evaluis nonmonatory)*	OEC office expenses	CAL compaign workers! anlastes	

contribution (explain nonmonetary) SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals TRS ND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) VOT voter registration

campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Sergio Prince				
	CNS			5,000.00
King's Fish House				
	FND			1,367.00
Jeanette Krembas				
	FND			250.00
	1			
* Designants that are contributions or independent are additional and the contributions of the contribution of the				

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

6,617.00

Schedule F **Accrued Expenses (Unpaid Bills)**

Type or print in ink. Amounts may be rounded to whole dollars.

CALIFORNIA Statement covers period **FORM** 01/01/2005 from 06/30/2005 Page 69 of 77 through_ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

Pat Bates for Supervisor

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

OFC

PET

PHO

POL

campaign paraphernalia/misc.

CNS campaign consultants contribution (explain nonmonetary)* civic donations CVC

candidate filing/ballot fees fundraising events

independent expenditure supporting/opposing others (explain)* ND legal defense

LEG campaign literature and mailings LIT

MBR member communications

RFD returned contributions MTG meetings and appearances

office expenses petition circulating

phone banks polling and survey research postage, delivery and messenger services

professional services (legal, accounting) PRO print ads PRT

RAD radio airtime and production costs

SAL campaign workers' salaries t.v. or cable airlime and production costs

candidate travel, lodging, and meals staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

1265511

voter registration

WEB information technology costs (internet, e-mail)

.rr campaign literature and mailings	110 pint 223			(-)	(4)
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(C) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Arroyo Trabuco Golf Club	FND	8,275.85	0.00	8,275.85	0.00
					·
		0.00	200.00	0.00	200.00
Betty Presley & Associates, Inc.	PRO	0.00	200.00		
	nno.	0.00	625.00	0.00	625.00
Betty Presley & Associates, Inc.	PRO	0.50			
			}		
 Payments that are contributions or independent expenditures must also be summarized on Schedule D. 	SUBTOTALS	\$ 8,275.85	\$ 825.00	\$ 8,275.85	825.00

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from 01/01/2005	california 460 form
through06/30/2005	Page 70 of 77
	I.D. NUMBER
	1265511

NAME OF FILER

Pat Bates for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

print ads

POL

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

PET

Fil. candidate filing/ballot fees

MBR

MTG

OFC

PFC

PHO

FiL candidate filing/ballot fees
fND fundraising events
independent expenditure supporting/opposing others (explain)*

LEG legal defense
LIT campaign literature and mailings

MBR member communications RAD radio airlime and production costs MTG meetings and appearances RFD returned contributions

To petition circulating

Telephore the returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

phone banks

polling and survey research

postage, delivery and messenger services

TRC candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals

TSF transfer between committees of the sai

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
The St. Regis Monarch Beach	FND	0.00	4,763.35	0.00	4,763.35
Paule Consulting, Inc.	CNS	0.00	539.28	0.00	539.28
The Monaco Group	FND	0.00	559.88	0.00	559.88
Paule Consulting, Inc.	CNS	0.00	4,781.10	0.00	4,781.10
	SUBTOTALS	\$ 0.00	\$ 10,643.61	\$ 0.00	\$ 10,643.61

professional services (legal, accounting)

Schedule F (Continuation Sheet) **Accrued Expenses (Unpaid Bills)**

Type or print in ink. Amounts may be rounded to whole dollars.

SCHEDULE F (CONT)

Statement covers period	CALIFORNIA 460
from <u>01/01/2005</u>	FORM 400
through 06/30/2005	Page of
	I.D. NUMBER
	1265513

NAME OF FILER

LIT

Pat Bates for Supervisor

campaign literature and mailings

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

campaign paraphernalia/misc. MBR member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions contribution (explain nonmonetary)* OFC office expenses CVC civic donations PET petition circulating candidate filing/ballot fees

phone banks FND fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)* ND POS postage, delivery and messenger services LEG legal defense

professional services (legal, accounting) PRT print ads

RAD radio airtime and production costs

SAL campaign workers' salaries

t.v. or cable airtime and production costs candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor TSF

VOT voter registration

WEB information technology costs (internet, e-mail) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

			·		
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PÉRIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSI OF THIS PERIOD
Paule Consulting, Inc.	FND	0.00	302.97	0.00	302.97
			·		
Betty Presley & Associates, Inc.	PRO	0.00	2,100.00	0.00	2,100.00
					, , , , ,
		,			
	SUBTOTALS	\$ 0.00	2,402.97	0.00	2,402.97

Schedule G
Payments Made by an Agent or Independent
Contractor (on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 1CO
from01/01/2005	FORM 46U
through 06/30/2005	Page of
	I.D. NUMBER
	1265511

NAME OF AGENT OR INDEPENDENT CONTRACTOR

SEE INSTRUCTIONS ON REVERSE

Pat Bates for Supervisor

NAME OF FILER

Gilliard Blanning Wysocki & Associates

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)*

CVC civic donations candidate filing/ballot fees FIL fundraising events FND

independent expenditure supporting/opposing others (explain)* ND LEG legal defense

Ш campaign literature and mailings MBR member communications MTG meetings and appearances

OFC office expenses PET petition circulating PHO phone banks

POL. polling and survey research postage, delivery and messenger services professional services (legal, accounting) PRO

PRT print ads RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs candidate travel, lodging, and meals

staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR .	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Monaco Group	LIT			21,678.64
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* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

21,678.64

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from 01/01/2005	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE		through <u>06/30/2005</u>	Page
NAME OF FILER Pat Bates for Supervisor			I.D. NUMBER 1265511
NAME OF AGENT OR INDEPENDENT CONTRACTOR Diane Harkey	·· · ·		
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)*	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services	RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production returned contributions TRC candidate travel, lodging, and staff/spouse travel, lodging,	costs duction costs d meals

professional services (legal, accounting)

PRT

print ads

VOT voter registration

WEB information technology costs (internet, e-mail)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

legal defense

campaign literature and mailings

LEG

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	A	IOUNT PAID
CostCo Wholesale	FND			
·				324.3
Smart & Final	FINE			
	FND			141.6
US Postmaster	POS			138.75
				230.7.
	1			
				
			1	
	1.			
ttach additional information on appropriately labeled continuation sheets.			TOTAL* \$	

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

Statement -		SCHEDULE
Statement covers period	CALIFORNIA	460
from01/01/2005	FORM	460

SEE INSTRUCTIONS ON REVERSE		through <u>06/30/2005</u>	Page 74 . 77
NAME OF FILER			Page of
Pat Bates for Supervisor			I.D. NUMBER
NAME OF AGENT OR INDEPENDENT CONTRACTOR Jeanette Krembas			1265511
CODES: If one of the following codes accurately describe	s the payment, you may enter the code. Oth	erwise, describe the payment	
CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations Fil. candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings	MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and product candidate travel, lodging, and returned transfer between committees of voter registration	costs ction costs meals nd meals of the same candidate/sponsor
* Payments that are contributions or independent expenditures	•	WEB information technology costs (i	internet, e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	
copical Blues Band	FND	DESCRIPTION OF PAYMENT	AMOUNT PAID
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ch additional information on appropriately labeled continuation sheets.			

TOTAL* \$

250.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

chedule G ayments Made by an Agent or Independent ontractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded to whole dollars.

SCHEDULE G Statement covers period CALIFORNIA 01/01/2005

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SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through <u>06/30/2005</u>	Page
Pat Bates for Supervisor NAME OF AGENT OR INDEPENDENT CONTRACTOR Paule Consulting, Inc.			I.D. NUMBER 1265511
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees fND fundraising events independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must also	MDR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the campaign workers' salaries TRC candidate travel, lodging, and travel, lodging, and travel, lodging, and travel, lodging, and travel.	costs ction costs meals nd meals of the same candidate/sponsor

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	
Data Mart		DESCRIPTION OF PAYMENT	AMOUNT PAID
DO-18	FND		
			136.2
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inko's			
ATIIKO'S	FND		
Add the state of t			675.9
	1 1		
Office Depot			j
	FND		
			209.7
	·		1
	[]		1
			1
Paper.com Inc.			ĺ
	PND		
			310.03
	· [ł
	'		
			İ
tach additional information on appropriately labeled continuation s	hooto		

TOTAL* \$

1,331.89

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G	Type or print in ink.		SCHEDULE (
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amounts may be rounded to whole dollars.	Statement covers period from 01/01/2005	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE		through <u>06/30/2005</u>	Page		
NAME OF FILER			I.D. NUMBER		
Pat Bates for Supervisor			1265511		
NAME OF AGENT OR INDEPENDENT CONTRACTOR			Make a law and a second		
Paule Consulting, Inc.					
CODES: If one of the following codes accurately describes the	ne payment, you may enter the code.	Otherwise, describe the paymen			
CMP campaign paraphernalia/misc.		RAD radio sirtime and production			

CIVIE	campaign paraphernalia/misc.	MBK	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances		returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads		information technology costs (internet e-mail)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
JS Postmaster	FND		
Action Office and the Control of the			1,042.2
			1
(inko's			
	FND		242.5
	- 		
			•
•			1
tach additional information on appropriately labeled continuation sheets.			TOTAL* \$ 1,284.8

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period	SCHEDULE (
01/01/2005	A 4 1 = 6 =			

		from 01/01/2005	FORM 460
EE INSTRUCTIONS ON REVERSE			
AME OF FILER		through 06/30/2005	7.7
Pat Bates for Supervisor			Page of
AME OF AGENT OR INDEPENDENT CONTRACTOR			I.D. NUMBER
The Monaco Group			1265511
CODES: If one of the following codes accurately descrease accurately des	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of returned contributions SAL campaign workers' salaries t.v. or cable airtime and production of returned contributions TEL t.v. or cable airtime and production of returned candidate travel, lodging, and staff/spouse travel, lodging, and transfer between committees voter registration	ction costs meals

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) US POSTMASTEY	CODE	OR	DECODITION	
	POS	- 	DESCRIPTION OF PAYMENT	AMOUNT PAID
				394.0
US Postmaster		. •		
	LIT	+		
	1			8,750.0
		+		
	1			
		 		
		1.		
ach additional information on appropriately labeled continuation she		<u> </u>	·	

9,144.00

TOTAL* \$

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.